



DIVISION OF DEVELOPMENTAL DISABILITIES
Olympia, Washington

TITLE: NURSE DELEGATION SERVICES POLICY 6.15

Authority:	Chapter 18.88A RCW	Nursing Assistants
	Chapter 71A RCW	Developmental Disabilities
	Chapter 246-840 WAC	Protocol for Delegating Nursing Care Task
	Chapter 246-841 WAC	Nursing Assistants
	Chapter 246-888 WAC	Medication Assistance
	Chapter 388-76	Adult Family Homes Minimum Licensing Requirements
	Chapter 388-78A WAC	Boarding Home Licensing Rules
	Chapter 388-101 WAC	Certified Community Residential Services and Supports
	Chapter 388-825 WAC	DD Services

PURPOSE

Nurse Delegation (ND) services can enhance the viability and quality of client support in private homes and community residential settings and allow persons to live as independently as possible with maximum safeguards.

Nurse Delegation is a service option that provides training and nursing management for providers who perform delegated nursing tasks. Clients who receive nurse delegation services must be considered “stable and predictable” by the delegating nurse.

SCOPE

This program policy and procedures apply to all DDD Case Resource Managers (CRM) who authorize Nurse Delegation services.

PROGRAM POLICY

When authorizing for Nurse Delegation services, the CRM must determine that:

1. The client is eligible to receive nurse delegation services; and
2. The delegating nurse/agency has an ADSA Nurse Delegation contract to provide nurse delegation services; and

3. The provider who performs delegated nursing tasks meets the training and registration requirements for nurse delegation.

PROCEDURE

A. Nursing Care Tasks

1. Tasks Which May Be Delegated

The Registered Nurse Delegator (RND) may delegate specific nursing care tasks to nursing assistants. The most commonly delegated tasks are administration of non-injectable medications, blood glucose testing, colostomy care, and tube feedings. Before delegating, the RND must determine that specific criteria described in the Nurse Delegation protocol (WAC 246-840-910 to 960) are met and ensure that the patient is in a stable and predictable condition.

2. Tasks Which May Never Be Delegated

According to RCW 18.79.260(3)(e), the RND may not delegate the following nursing care tasks:

- a. Sterile procedures;
- b. Administration of medications by injection;
- c. Maintenance of central intravenous lines; and
- d. Acts that require nursing judgment.

3. Where Can Nursing Care Tasks Be Delegated?

Registered Nurses (RN) can delegate specific nursing care tasks to Nursing Assistants Registered (NAR), or Nursing Assistants Certified (NAC) who provide care in licensed adult family homes, licensed boarding homes, companion homes, in-home care settings, and state-certified programs for individuals with developmental disabilities. In the in-home settings, these tasks may only be provided to clients on the Basic Plus and Core waivers.

B. Eligibility to Receive Nurse Delegation Services

1. Clients are eligible to receive nurse delegation services when they need a specific nursing task and are:
 - a. Receiving supported living services;

- b. Residing in adult family homes;
 - c. Residing in group homes;
 - d. Residing in companion homes; or
 - e. Residing in in-home settlings (as limited in 2. below).
2. For clients in in-home settings, the following additional criteria must be met:
- a. The client is on the Basic Plus or Core Waiver; and
 - b. The client does not have a parent or a relative provider able to perform the delegated nursing task during the time nurse delegation services are needed.
3. By law, nurse delegation may occur in any licensed boarding home. However, DDD does not pay and the CRM should not authorize payment for a contracted RND to provide nurse delegation services in boarding homes contracted as Adult Residential Care (ARC) facilities.
4. DDD will pay and the CRM may authorize payment for a contacted RND to provide nurse delegation services in boarding homes contracted as group homes.
5. In all instances, the CRM must document the client's need for nurse delegation in the client's CARE/POC/ISP.

C. Authorization to Provide Nurse Delegation Services

Only RNs or agencies with an ADSA Nurse Delegation contract can be authorized for payment to provide nurse delegation services.

The list of currently contracted Nurse Delegators can be found on the ADSA Intranet website at <http://adsaweb.dshs.wa.gov/hcs/sua/displayACD.asp>. Select Referral Type "DD clients" and then select the region the client resides in, and sort.

D. Training Requirements for Providers Who Perform Delegated Nursing Tasks

Before performing a delegated task, the provider must have completed:

- 1. Registration or certification as a Nursing Assistant and renew annually;

2. The *Nurse Delegation for Nursing Assistants* class (nine hours), either the classroom or self-study version;
3. For NAR only:
 - a. For providers working in Supported Living: *DDD Core Training* (32 hours);
 - b. For providers working in all other settings: *Fundamentals of Caregiving* (28 hours);
 - c. An NAR may not perform a delegated task before *DDD Core Training* or *Fundamentals of Caregiving* is completed.
 - d. *DDD Core Training* or *Fundamentals of Caregiving* is not required for an NAC to perform a delegated task.

E. Case Resource Manager Referral for Nurse Delegation

1. When the need for nurse delegation services is identified, the CRM will make a referral for an ND assessment and provide the following information to the delegating nurse:
 - a. Client's most current assessment (CARE/POC/ISP);
 - b. Type of setting client resides in (i.e., SL, GH, AFH, Companion Home, and In-home);
 - c. Release of information; and
 - d. Authorization/referral for services (see Attachment A for sample form).
2. The CRM will also:
 - a. Determine if the provider has met the training and registration requirements in Section D above. The CRM may assist the provider to meet the requirements or assist the client in finding a provider who is qualified to perform the delegated task.
 - b. Refer and document the referral to a [contracted Registered Nurse Delegator \(RND\)](#). The referral packet must include items included in 4.a above.

- c. Document and establish a communication plan with the RND, which specifies how often and when the CRM will communicate case related issues with the RND.
- d. Document all the above and any ongoing communication in the Service Episode Record (SER).
- e. Authorize the RND for payment not to exceed 40 units per month through SSPS, using the appropriate program code (see Section I).
- f. In exceptional situations, if a client needs more than 40 units (10 hours) in a specific month, obtain supervisory approval prior to authorization.

F. Additional CRM Responsibilities for In-Home Clients

For nurse delegation in the in-home setting, the CRM will ensure that the provider has the necessary training and registration to perform a delegated task. If needed, the CRM will give the provider:

- 1. A list of approved trainers for *Fundamentals of Caregiving*;
- 2. A list of DDD contracted trainers for the 9-hour class, *Nurse Delegation for Nursing Assistants*.
- 3. An application for registration as a nursing assistant; and
- 4. A signed and dated payment voucher for the application fee. Payment is provided for the initial registration fee only, not renewals. Follow instructions for completing the voucher. Advise the provider to send the payment voucher and application to:

Department of Health – Health Professions
P.O. Box 47864
Olympia, Washington 98504-7901

G. DDD Contracted Trainers for the Nurse Delegation Class

- 1. DDD reimburses nurses who teach the 9-hour Nurse Delegation class to providers who work in DDD settings. The nurse must have a nurse delegation training contact with DDD. These training contacts are obtained through the ADSA Contracts Manager.

2. The CRM may provide a list of DDD contracted trainers for the *Nurse Delegation for Nursing Assistants* class. DDD does not reimburse trainers for teaching AFH staff. The AFH or the individual attending the class must pay the tuition in these cases.
3. DDD also pays the hourly wage for providers who complete the 9-hour nurse delegation class. The CRM will authorize payment for up to nine hours of wages under SSPS code 7512. For providers performing nurse delegation in in-home settings, this wage is paid at the department published Individual Provider (IP) rate. Companion Home providers are not reimbursed separately for the training time. For SL/GH providers, this wage is paid at the residential benchmark.
4. Document all the above and any ongoing communication in the client's SER.

H. Responsibilities of the Registered Nurse Delegator (RND)

The RND must:

1. Verify that the caregiver:
 - a. Has met training and registration requirements;
 - b. The registration is current and without restriction; and
 - c. The caregiver is competent to perform the delegated task.
2. Assess the nursing needs of the client, determine the appropriateness of delegation in the specific situation and, if appropriate, teach the caregiver to perform the nursing task.
3. Monitor the caregiver's performance and continued appropriateness of the delegated task.
4. Communicate the results of the nurse delegation assessment to the CRM.
5. Establish a communication plan with the CRM as follows:
 - a. Specify in the plan how often and when the RND will communicate with the CRM; and

- b. Document the plan and all ongoing related communication in the client's nurse delegation file.
6. Document and perform all delegation activities as required by law, rule and policy.
7. Work with the CRM, providers, and interested parties when rescinding RND to develop an alternative plan that ensures continuity for the provision of the delegated task.

I. SSPS CODES FOR NURSE DELEGATION

1. There are six SSPS codes for registered nurses providing Nurse Delegation:
 - 7511 Nurse Delegation Core Training
 - 7512 Nurse Delegation Core Training Staff Class Hours
 - 7513 Nurse Delegation Services
 - 8253 Nurse Delegation HCBS Basic Plus Waiver
 - 8353 Nurse Delegation HCBS Core Waiver
 - 8453 Nurse Delegation HCBS Community Protection Waiver
2. All codes pay an individual registered nurse or an agency employing/contracting with registered nurses, for nurse delegation activities. Billable services may include the initial nursing assessment, reassessments, teaching or supervising a nursing assistant, collateral contacts and related travel time.
3. Reason Codes should be selected to indicate the primary nursing task needed. Only one code may be selected.

CODE	TITLE
A	Supported Living
B	Group Home
C	Companion Home
D	Licensed Adult Family Home
E	Licensed Boarding Home
F	In-Home

4. The current rate for nurse delegation is \$8.08 per unit. One unit equals 15 minutes. A maximum of 40 units (5 hours) may be authorized each month. The service may be authorized to continue for a maximum of 6 months.

5. Nurse delegation is an intermittent service. The nurse is required to visit at least once every ninety days, and may not need to see a client more frequently. However, the delegating nurse may determine that some clients need to be seen more often. The Central Office Nurse Delegation Program Manager will monitor the nurse's performance, including frequency of visits and SSPS payments. See Service Code Data Sheets in SSPS for additional information.

EXCEPTIONS

Any exception to this policy must have the prior written approval of the Division Director.

SUPERSESSION

None

Approved: /s/ Linda Rolfe
Director, Division of Developmental Disabilities

Date: 9/1/2005

Attachment A, *DDD Nurse Delegation Referral Form*

DDD NURSE DELEGATION REFERRAL FORM

DATE: _____

TO: _____

FROM: _____

TELEPHONE: _____ **FAX:** _____

ATTACHED IS A SERVICE PLAN FOR: _____

CLIENT NAME: _____ **DOB:** _____

PROVIDER: _____

PRESCRIBER: _____

TREATMENT DIAGNOSIS: _____

RN DELEGATOR COMPLETES THE FOLLOWING:
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- ☐ Oral and/or topical medications/ointments
- ☐ Eye, ear, and/or nose medication
- ☐ Dressing changes and urinary catheterization using clean techniques
- ☐ Suppositories, enemas and ostomy care in an established and healed condition
- ☐ Blood glucose monitoring
- ☐ Gastrostomy feedings in an established and healed condition
- ☐ Other (List):

Nurse Delegation Task was delegated: ☐ **Yes** ☐ **No**

If “no,” please note the reason for the denial or delay and action taken/recommended.

Assessment Date: _____

PLEASE COMPLETE THE ABOVE FORM AND RETURN A COPY OF THIS FORM TO:

_____ **CASE/RESOURCE MANAGER**

_____ **DATE**